

Attorney Docket No. **IMMR-068/01US (new)**  
**IMM005B (old)**



#26/E  
(ANE)  
LTYSN  
PATENT  
10/27/03

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of Louis B. Rosenberg

Serial No.: 09/852,401

Examiner: Chanh Nguyen

Confirmation No.: 5620

Art Unit: 2675

Filed: May 9, 2001

**RECEIVED**

For: Laparoscopic Simulation Interface

OCT 07 2003

U.S. Patent and Trademark Office  
2011 South Clark Place  
Customer Window, Mail Stop AF  
Crystal Plaza Two, Lobby, Room 1B03  
Arlington, VA 22202

Technology Center 2600

**REPLY AND AMENDMENT UNDER 37 C.F.R. 1.116**

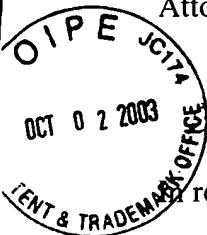
In response to the Office Action mailed July 3, 2003, Applicants submit the following Amendment and Remarks.

Applicant does not believe that extensions of time or fees for net addition of claims are required beyond those that may otherwise be provided for in documents accompanying this paper. If additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefore (including fees for net addition of claims) are hereby authorized to be charged to our Deposit Account No. 50-1283.

**Amendments to the claims** are reflected in the listing of claims, which begins on page 2 of this paper.

**Remarks** begin on page 6 of this paper.

AF



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PATENT

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## TRANSMITTAL OF RESPONSE

Enclosed are the following documents in response to the  mailed  for the above-identified application:

- Reply and Amendment Under 37 C.F.R. 1.116
- Return receipt postcard
- Check No. \_\_\_ in the amount of \$ \_\_\_ for the total fee as calculated below
- Other: \_\_\_\_\_

The fee has been calculated as follows:

	NO. OF CLAIMS	NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	24	- 24 =		x \$18.00	0.00
Independent Claims	4	- 4 =		x \$84.00	0.00
If multiple dependent claims are presented, add \$290.00					
Total Amendment Fee					0.00
If small entity status is applicable, subtract 50% of Total Amendment Fee					
Other fees: (specify)					
<b>TOTAL FEE DUE</b>					0.00

- A check for the total fee is attached.
- Please charge \$ to Deposit Account No. 50-1283 for the total fee. This paper is being submitted in duplicate.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§1.16, 1.17, and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. (PA) 03-3117 (RE) 50-1283.

Dated: October 2, 2003

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By:

Respectfully submitted,  
**COOLEY GODWARD LLP**



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 Reg. No. 41,087